

County: Kewaunee
ALGOMA LONG TERM CARE UNIT
1510 FREMONT STREET

Facility ID: 1030

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ALGOMA 54201 Phone: (920) 487-5511
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 43
Total Licensed Bed Capacity (12/31/01): 63
Number of Residents on 12/31/01: 43

Ownership:
Highest Level License: City
Operate in Conjunction with CBRF? Skilled
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 46

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		32.6
Supp. Home Care-Personal Care	No					1 - 4 Years		32.6
Supp. Home Care-Household Services	No	Developmental Disabilities	2.3	Under 65	2.3	More Than 4 Years		34.9
Day Services	No	Mental Illness (Org. /Psy)	11.6	65 - 74	14.0			-----
Respite Care	No	Mental Illness (Other)	4.7	75 - 84	37.2			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	37.2	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	4.7		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	11.6	65 & Over	97.7	-----		
Transportation	No	Cerebrovascular	9.3		-----	RNs		14.6
Referral Service	No	Diabetes	2.3	Sex	%	LPNs		13.6
Other Services	No	Respiratory	4.7		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	48.8	Male	32.6	Aides, & Orderlies		
Mentally Ill	No		-----	Female	67.4			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Per Di em (\$)	Total Resi - dents	% Of All
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	No.	%				
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	1	100.0	240	31	100.0	96	0	0.0	0	10	90.9	118	0	0.0	0	0	0.0	42	97.7
Intermediate	---	---	---	0	0.0	0	0	0.0	0	1	9.1	118	0	0.0	0	0	0.0	1	2.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	1	100.0		31	100.0		0	0.0		11	100.0		0	0.0		0	0.0	43	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	29.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	6.5	Bathing	0.0	46.5	53.5	43
Other Nursing Homes	16.1	Dressing	0.0	58.1	41.9	43
Acute Care Hospitals	41.9	Transferring	11.6	34.9	53.5	43
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	7.0	44.2	48.8	43
Rehabilitation Hospitals	0.0	Eating	48.8	23.3	27.9	43
Other Locations	6.5	*****				
Total Number of Admissions	31	Continence	%	Special Treatments		
Percent Discharges To:		Indwelling Or External Catheter	4.7	Receiving Respiratory Care	18.6	
Private Home/No Home Health	13.2	Occ/Freq. Incontinent of Bladder	67.4	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	5.3	Occ/Freq. Incontinent of Bowel	41.9	Receiving Suctioning	2.3	
Other Nursing Homes	2.6	Mobility		Receiving Ostomy Care	2.3	
Acute Care Hospitals	0.0			Receiving Tube Feeding	2.3	
Psych. Hosp. -MR/DD Facilities	0.0			Receiving Mechanically Altered Diets	44.2	
Rehabilitation Hospitals	0.0	Physically Restrained	11.6			
Other Locations	5.3	Skin Care		Other Resident Characteristics		
Deaths	73.7	With Pressure Sores	2.3	Have Advance Directives	79.1	
Total Number of Discharges		With Rashes	16.3	Medications		
(Including Deaths)	38			Receiving Psychoactive Drugs	65.1	

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility	Ownership: Government		Bed Size: 50-99		Licensure: Skilled		All Facilities	
	%	Peer Group	Ratio	Peer Group	Ratio	Peer Group	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	73.0	87.7	0.83	85.1	0.86	84.4	0.86	84.6	0.86
Current Residents from In-County	81.4	76.7	1.06	72.2	1.13	75.4	1.08	77.0	1.06
Admissions from In-County, Still Residing	38.7	28.2	1.37	20.8	1.86	22.1	1.75	20.8	1.86
Admissions/Average Daily Census	67.4	91.3	0.74	111.7	0.60	118.1	0.57	128.9	0.52
Discharges/Average Daily Census	82.6	92.8	0.89	112.2	0.74	118.3	0.70	130.0	0.64
Discharges To Private Residence/Average Daily Census	15.2	32.9	0.46	42.8	0.36	46.1	0.33	52.8	0.29
Residents Receiving Skilled Care	97.7	90.8	1.08	91.3	1.07	91.6	1.07	85.3	1.15
Residents Aged 65 and Older	97.7	88.8	1.10	93.6	1.04	94.2	1.04	87.5	1.12
Title 19 (Medicaid) Funded Residents	72.1	67.9	1.06	67.0	1.08	69.7	1.03	68.7	1.05
Private Pay Funded Residents	25.6	19.7	1.30	23.5	1.09	21.2	1.21	22.0	1.16
Developmentally Disabled Residents	2.3	0.8	2.91	0.9	2.58	0.8	2.95	7.6	0.31
Mentally Ill Residents	16.3	46.1	0.35	41.0	0.40	39.5	0.41	33.8	0.48
General Medical Service Residents	48.8	14.8	3.29	16.1	3.04	16.2	3.01	19.4	2.52
Impaired ADL (Mean)	66.5	49.7	1.34	48.7	1.37	48.5	1.37	49.3	1.35
Psychological Problems	65.1	56.1	1.16	50.2	1.30	50.0	1.30	51.9	1.26
Nursing Care Required (Mean)	11.0	6.7	1.65	7.3	1.52	7.0	1.57	7.3	1.51